

MAR 13 2006 MON 10:54 AM ST JUDE MEDICAL CRMD

FAX NO. 4087380285

P. 02

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24473 7590 01/20/2006

STEVEN M MITCHELL
PACESSETTER INC
701 EAST EVELYN AVENUE
SUNNYVALE, CA 94086
03/14/2006 TBESHAR2 00000058 220265 10828897

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ESTHER CAMPBELL	(Depositor's name)
<i>Esther Campbell</i>	(Signature)
March 13, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10828,897	04/20/2004	Michael Paris	A04P3006-US1	6172

TITLE OF INVENTION: METHODS AND DEVICES FOR DETERMINING HEART RATE RECOVERY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	04/20/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
REIDEL, JESSICA L	3766	600-519000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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1. STEVEN M. MITCHELL

2. _____

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

PACESSETTER, INC.

SUNNYVALE, CALIFORNIA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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 Publication Fee (No small entity discount permitted)
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature SM M. MITCHELLDate 3/13/06Typed or printed name STEVEN M. MITCHELLRegistration No. 31,857

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ST. JUDE MEDICAL
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Sunnyvale, California 94086

FACSIMILE COVER SHEET

Deliver to: USPTO Date: *13* March 6, 2006
 Mailstop Issue Fee Fax No.: 571-273-2885
 Application No.: 10/828,897 Filing Date: April 20, 2004
 Docket No.: A04P3006-US1
 From: Esther Campbell No. of pgs including cover sheet: 2
 (408) 522-6181

Enclosed are the following documents:

<input type="checkbox"/> Amendment: Response (____ pgs)	<input checked="" type="checkbox"/> Issue Fee Transmittal
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<input type="checkbox"/> Appeal Brief (in triplicate) (____ pgs)	<input type="checkbox"/> Petition for:
<input type="checkbox"/> Application: (____ pgs w/ cover & abstract)	<input type="checkbox"/> Request for Continued Examination (RCE)
<input type="checkbox"/> Assignment & Recordation Cover Sheet (____ pgs)	<input type="checkbox"/> Reply Brief (____ pgs)
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<input type="checkbox"/> Declaration & POA (____ pgs)	<input type="checkbox"/> Request to Rescind Previous
<input type="checkbox"/> Drawings: ____ sheets, ____ figures	<input type="checkbox"/> Nonpublication Request
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Esther Campbell *3/6/06*
Date

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